Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	NVS64AGC	A. BUILDING _____ B. WING _____	C 08/11/2009

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SANCHEZ HOME CARE	4504 LA ROCA CIRCLE LAS VEGAS, NV 89121

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Y 000	Initial Comments The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws. This Statement of Deficiencies was generated as a result of a complaint investigation conducted at your facility on 8/11/09 and 8/13/09. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division. The facility was licensed for seven Residential Facility for Group beds for elderly and disabled person and/or persons with mental illnesses Category II residents. The census at the time of the survey was four. Four resident files were reviewed and four employee files were reviewed. One discharged resident file was reviewed. The facility received a grade of D. Complaint #NV00022710 was substantiated. The following deficiencies were identified:	Y 000		
Y 070 SS=E	449.196(1)(f) Qualifications of Caregiver-8 hours training NAC 449.196 1. A caregiver of a residential facility must: (f) Receive annually not less than 8 hours of training related to providing for the needs of the residents of a residential facility. This Regulation is not met as evidenced by: Based on record review on 8/13/09, the facility	Y 070		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE (X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 070	Continued From page 1 failed to ensure that 1 of 2 caregivers received eight hours of annual training (Employee #1). Severity: 2 Scope: 2	Y 070		
Y 085 SS=F	449.199(1) Staffing-CG on duty all times NAC 449.199 1. The administrator of a residential facility shall ensure that a sufficient number of caregivers are present at the facility to conduct activities and provide care and protective supervision for the residents. There must be at least one caregiver on the premises of the facility if one or more residents are present at the facility. This Regulation is not met as evidenced by: Based on interview and observation on 8/11/09, the administrator failed to ensure that a sufficient number of caregivers were on duty. On 8/11/09 Employee #1 left with Employee # 4 to go to the labor board. Based on interview on 8/11/09 and record review 8/13/09, Employee #2, the only employee on site, failed to have current caregiver training or medication management training. Severity: 2 Scope: 3	Y 085		
Y 103 SS=F	449.200(1)(d) Personnel File - NAC 441A NAC 449.200 1. Except as otherwise provided in subsection 2,	Y 103		

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Y 103	Continued From page 2 a separate personnel file must be kept for each member of the staff of a facility and must include: (d) The health certificates required pursuant to chapter 441A of NAC for the employee. This Regulation is not met as evidenced by: Based on record review on 8/13/09, the facility failed to ensure 2 of 4 employees complied with NAC 441A.375 regarding tuberculosis testing (Employee #3 and #4) for the protection of all residents. Employee #3 failed to show evidence of a negative chest x-ray after a positive TB test. Employee #4 failed to show evidence of an annual TB test. Based on record review on 8/13/09, the facility failed to ensure 4 of 4 employees complied with NAC 441A.375 regarding physical examination from a licensed physician (Employee #1, Employee #2, Employee #3, and Employee #4). This was a repeat deficiency from the 4/8/09 State Licensure survey. Severity: 2 Scope: 3	Y 103		
Y 105 SS=F	449.200(1)(f) Personnel File - Background Check NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (f) Evidence of compliance with NRS 449.176 to 449.185, inclusive.	Y 105		

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Y 105	Continued From page 3 This Regulation is not met as evidenced by: Based on record review on 8/13/09, the facility failed to ensure 3 of 4 employees met background check requirements (Employee #1, #2 and #4). Employee #1 failed to show evidence of fingerprints and state and FBI background checks. Employee #2 failed to show evidence of a signed criminal history statement, fingerprints, and state and FBI background checks. Employee #4 failed to show evidence of state and FBI background checks. This was a repeat deficiency from the 4/8/09 State Licensure survey. Severity: 2 Scope: 3	Y 105		
Y 175 SS=F	449.209(4)(b) Health and Sanitation-Hazards NAC 449.209 4. To the extent practicable, the premises of the facility must be kept free from: (b) Hazards, including obstacles that impede the free movement of residents within and outside the facility. This Regulation is not met as evidenced by: Based on interview and observation on 8/11/09, the facility failed to ensure the premises of the facility was free of hazards. The toilet in the bathroom in Bedroom #1 overflowed every time it was flushed. There was standing water in the bathroom. Severity: 2 Scope: 3	Y 175		

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Y 251	Continued From page 4	Y 251		
Y 251 SS=F	449.217(2) Storage of Food-Perishable foods refrigerated NAC 449.217 2. Perishable foods must be refrigerated at a temperature of 40 degrees Fahrenheit or less. Frozen foods must be kept at a temperature of 0 degrees or less. This Regulation is not met as evidenced by: Based on observation on 8/13/09, the facility failed to ensure refrigerated foods were kept at a temperature of 40 degrees or less. The breaker for the fridge was tripped, Employee #1 did not know where the breaker box was, the temperature in the fridge was approximately 50 degrees. Severity: 2 Scope: 3	Y 251		
Y 252 SS=D	449.217(3) Storage of Food-Adequate storage; Packaging NAC 449.217 3. Sufficient storage must be available for all food and equipment used for cooking and storing food. Food that is stored must be appropriately packaged. This Regulation is not met as evidenced by: Based on observation on 8/11/09 and 8/13/09, the facility failed to ensure all food was	Y 252		

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Y 252	Continued From page 5 appropriately packaged. A package of hot dogs was opened, and an uncovered bowl of green beans were found in the freezer. Severity: 2 Scope: 1	Y 252		
Y 274 SS=C	449.2175(5) Service of Food - Substitutions NAC 449.2175 5. Any substitution for an item on the menu must be documented and kept on file with the menu for at least 90 days after the substitution occurs. A substitution must be posted in a conspicuous place during the service of the meal. This Regulation is not met as evidenced by: Based on observation and interview on 8/13/09, the facility failed to ensure menu substitutions were documented and retained for at least 90 days. The facility failed to follow the posted menu for 2 of 2 meals observed on 8/13/09, and substitutions were not recorded. Severity: 1 Scope: 3	Y 274		
Y 276 SS=F	449.2175(7) Nutrition and Service of Food NAC 449.2175 7. Meals must be nutritious, served in an appropriate manner, suitable for the residents and prepared with regard for individual preferences and religious requirements. At least three meals a day must be served at regular intervals. The times at which meals will be	Y 276		

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Y 276	Continued From page 6 served must be posted. Not more than 14 hours may elapse between the meal in the evening and breakfast the next day. Snacks must be made available between meals for the residents who are not prohibited by their physicians from eating between meals. This Regulation is not met as evidenced by: Based on observation on 8/13/09, the facility failed to ensure food was prepared appropriately. Pork chops and milk were left on the counter to thaw. Severity: 2 Scope: 3	Y 276		
Y 530 SS=C	449.260(1)(e) Activities for Residents NAC 449.260 (e) Provide for the residents at least 10 hours each week of scheduled activities that are suited to their interests and capacities. This Regulation is not met as evidenced by: Based on interview and observation on 8/11/09 and 8/13/09, the facility failed to ensure 10 hours of activities each week. On 8/13/09, Employee #1 stated she did not follow the activity calender. Severity: 1 Scope: 3	Y 530		
Y 626 SS=E	449.2702(6)(b)(1,2,&3) Restraint Definition NAC 449.2702	Y 626		

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Y 626	Continued From page 7 6. As used in this section: (b) "Restraint" means: (1) A psychopharmacologic drug that is used for discipline or convenience and is not required to treat medical symptoms; (2) A manual method for restricting a resident's freedom of movement or his normal access to his body; or (3) A device or material or equipment which is attached to or adjacent to a resident's body that cannot be removed easily by the resident and restricts the resident's freedom of movement or his normal access to his body. This Regulation is not met as evidenced by: Based on observation on 8/11/09, the facility failed to ensure 1 of 4 residents was not restrained by the use of a full bed rail (Resident #4). This is a repeat deficiency from the 4/8/09 annual State Licensure survey. Severity: 2 Scope: 2	Y 626		
Y 698 SS=E	Residents Requiring use of Oxygen-Storage 2. The caregivers employed by a residential facility with a resident who requires the use of oxygen shall: (b) ensure that: (5) All oxygen tanks kept in the facility are secured in a stand or to a wall; This REQUIREMENT is not met as evidenced by: Based on observation on 8/11/09 and 8/13/09,	Y 698		

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Y 698	Continued From page 8 the facility failed to secure oxygen tanks for 1 of 1 residents (Resident #1) using oxygen were secured in a rack or to the wall. Ten unsecured oxygen tanks were found in the hallway outside the bedroom of Resident #1. Two unsecured oxygen tanks were found next to the washing machine. Severity: 2 Scope: 3	Y 698		
Y 859 SS=E	449.274(5) Periodic Physical examination of a resident NAC 449.274 5. Before admission and each year after admission, or more frequently if there is a significant change in the physical condition of a resident, the facility shall obtain the results of a general physical examination of the resident by his physician. The resident must be cared for pursuant to any instructions provided by the resident's physician. This Regulation is not met as evidenced by: Based on record review on 8/13/09, the facility failed to ensure that 1 of 4 residents received a physical (Resident #2) prior to admission. This was a repeat deficiency from the 4/8/09 State Licensure survey. Severity: 2 Scope: 2	Y 859		

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Y 878	Continued From page 9	Y 878		
Y 878 SS=D	449.2742(6)(a)(1) Medication / Change order NAC 449.2742 6. Except as otherwise provided in this subsection, a medication prescribed by a physician must be administered as prescribed by the physician. If a physician orders a change in the amount or times medication is to be administered to a resident: (a) The caregiver responsible for assisting in the administration of the medication shall: (1) Comply with the order. This Regulation is not met as evidenced by: Based on record review and interview on 8/13/09, the facility failed to ensure that 1 of 4 residents received medications as prescribed (Resident #2). This was a repeat deficiency from the 4/8/09 State Licensure survey. Severity: 2 Scope: 1	Y 878		
Y 883 SS=E	449.2742(7) Medication / Resident Refusal NAC 449.2742 7. If a resident refuses, or otherwise misses, and administration of medication, a physician must be notified within 12 hours after the dose is refused or missed.	Y 883		

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Y 883	Continued From page 10 This Regulation is not met as evidenced by: Based on interview on 8/11/09, the facility failed to ensure the physician was notified with in 12 hours after a medication was missed or refused for 2 of 4 Residents. Employee #1 stated Resident #1 refused his medications regularly, however she failed to notify the physician. Resident #2 did not have any of her medications available and the doctor was not notified. Severity: 2 Scope: 2	Y 883		
Y 895 SS=F	449.2744(1)(b)(1) Medication / MAR NAC 449.2744 1. The administrator of a residential facility that provides assistance to residents in the administration of medication shall maintain: (b) A record of the medication administered to each resident. The record must include: (1) The type of medication administered; (2) The date and time that the medication was administered; (3) The date and time that a resident refuses, or otherwise misses, an administration of medication; and (4) Instructions for administering the medication to the resident that reflect the current order or prescription of the resident's physician.	Y 895		

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Y 895	Continued From page 11 This Regulation is not met as evidenced by: Based on observation and interview on 8/13/09, the facility did not destroy medications after they were discontinued, had expired or after a resident had been transferred. The facility retained medications for 12 residents who had either passed away or been transferred from the facility. Severity: 2 Scope: 3	Y 895		
Y 920 SS=F	449.2748(1) Medication Storage NAC 449.2748 1. Medication, including, without limitation, any over-the-counter medication, stored at a residential facility must be stored in a locked area that is cool and dry. The caregivers employed by the facility shall ensure that any medication or medical or diagnostic equipment that may be misused or appropriated by a resident or any other unauthorized person is protected. Medication for external use only must be kept in a locked area separate from other medications. A resident who is capable of administering medication to himself without supervision may keep his medication in his room if the medication is kept in a locked container for which the facility has been provided a key.	Y 920		

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Y 920	Continued From page 12 This Regulation is not met as evidenced by: Based on observation on 8/11/09 and 8/13/09, the facility failed to ensure that medications belonging to 4 of 4 residents were secured (Resident #1, #2, #3 and #4). The cabinet containing all medications had a padlock that was not locked. In addition, medications were unlocked on the counter near the medication cabinet. Severity: 2 Scope: 3	Y 920		
Y 921 SS=E	449.2748(2) Medication Storage NAC 449.2748 2. Medication stored in a refrigerator, including, without limitation, any over-the-counter medication, must be kept in a locked box unless the refrigerator is locked or is located in a locked room. This Regulation is not met as evidenced by: Based on observation on 8/11/09, the facility failed to ensure that refrigerated medications belonging to 1 of 4 residents were secured (Resident #1). Severity: 2 Scope: 2	Y 921		
Y 923 SS=E	449.2748(3)(b) Medication Container NAC 449.2748 3. Medication, including, without limitation, any over-the-counter medication or dietary supplement, must be:	Y 923		

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Y 923	Continued From page 13 (b) Kept in its original container until it is administered. This Regulation is not met as evidenced by: Based on interview and observation on 8/11/09 and 8/13/09, the facility failed to keep medications belonging to 1 of 4 residents in their original container (Resident #1). Three pre-poured cups of medications were found for Resident #1. Interview with Employee #1 revealed she would pre-pour his medications when he went to his dialysis appointments and leave them by his bed for when he returned. This was a repeat deficiency from the 4/8/09 State Licensure survey. Severity: 2 Scope: 2	Y 923		
Y 930 SS=C	449.2749(1)(a) Resident File NAC 449.2749 1. A separate file must be maintained for each resident of a residential facility and retained for at least 5 years after he permanently leaves the facility. The file must be kept locked in a place that is resistant to fire and is protected against unauthorized use. The file must contain all records, letters, assessments, medical information and any other information related to the resident, including without limitation: (a) The full name, address, date of birth and social security number of the resident.	Y 930		

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Y 930	Continued From page 14 This Regulation is not met as evidenced by: Based on observation on 8/11/09 and 8/13/09, the facility failed to ensure resident files were kept in a locked place. The facility kept files in a locked closet, but the lock was not secured on either visit. Severity: 1 Scope: 3	Y 930		
Y 936 SS=F	449.2749(1)(e) Resident file NAC 449.2749 1. A separate file must be maintained for each resident of a residential facility and retained for at least 5 years after he permanently leaves the facility. The file must be kept locked in a place that is resistant to fire and is protected against unauthorized use. The file must contain all records, letters, assessments, medical information and any other information related to the resident, including without limitation: (e) Evidence of compliance with the provisions of chapter 441A of NRS and the regulations adopted pursuant thereto. This Regulation is not met as evidenced by: Based on record review on 8/13/09, the facility failed to ensure 3 of 4 residents complied with NAC 441A.380 regarding tuberculosis testing (Resident #1, #2 and #4) which affected all residents. Resident #1 and Resident #2 failed to show evidence of a two-step TB test. Resident #4 failed to show evidence of a positive TB test and negative chest x-ray, however had an annual signs and symptoms review dated 2/10/09.	Y 936		

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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 936	Continued From page 15 This was a repeat deficiency from the 6/17/09 complaint investigation survey and from the 4/8/09 State Licensure survey. Severity: 2 Scope: 3	Y 936		